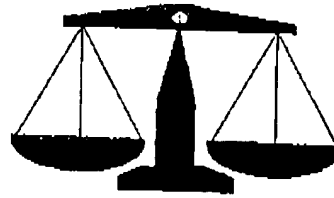


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**Fax**

To: Examiner Patrick Butler
Art Unit 1732

From: Katie McCarthy, Patent Assistant

Fax: 571-273-8300

Pages: 12 (including coversheet)

Phone:

Date: February 20, 2007

Re: Response and Amendment Under
C.F.R. § 1.111
Patent Application 10/722,830
Atty Docket #TRU-2200

CC:

Examiner Butler:

Please find attached the following documents in connection with the above identified application:

- Transmitted Form (1 page);
- Extension of Time (1 page)
- Amendment (0 pages).

Best regards,

Katie McCarthy
Katie McCarthy
Patent Assistant

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/722,830
	Filing Date	November 20, 2003
	First Named Inventor	Benjamin J. Sun
	Art Unit	1792
	Examiner Name	Patrick Butler
Total Number of Pages in This Submission	Attorney Docket Number	1131-2206

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	DENTSPLY International Inc.		
Signature	<i>Daniel W. Sullivan</i>		
Printed name	Daniel W. Sullivan, Esquire		
Date	February 20, 2007	Reg. No.	34937

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